

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>CatholicVote.org</b>		3. FEC Identification Number <b>C</b> C90011800
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported PO Box 259837		
(c) City, State and ZIP Code Madison WI 53725		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y

5. COVERING PERIOD:

FROM 

M M	/	D D	/	Y Y Y Y
01		01		2016

THROUGH 

M M	/	D D	/	Y Y Y Y
03		31		2016

6. TOTAL CONTRIBUTIONS..... 

14679.00
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7. TOTAL INDEPENDENT EXPENDITURES ..... 

6000.00
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

**TYPE OR PRINT NAME OF PERSON COMPLETING FORM**

**SIGNATURE**

**DATE**

*[Electronically Filed]*

Joshua Mercer

Joshua Mercer

04/15/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)  
CatholicVote.org

<b>A. Full Name (Last, First, Middle Initial)</b> Donald Babb			Date of Receipt																										
Mailing Address PO Box 359			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	3		3	0		2	0	1	6		
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3		3	0		2	0	1	6																				
City State Zip Code Powderly TX 75473			<b>Transaction ID : F56.4316</b>																										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00																										
Name of Employer Occupation Self Employed Self Employed																													

<b>B. Full Name (Last, First, Middle Initial)</b> Beth Barger			Date of Receipt																										
Mailing Address 281 Ahwahnee Lane			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	3		3	0		2	0	1	6		
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3		3	0		2	0	1	6																				
City State Zip Code Lake Forest IL 60045			<b>Transaction ID : F56.4314</b>																										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 300.00																										
Name of Employer Occupation Homemaker Homemaker																													

<b>C. Full Name (Last, First, Middle Initial)</b> Paul Cullen			Date of Receipt																										
Mailing Address 3292 117th LN NE			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	3		3	0		2	0	1	6		
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3		3	0		2	0	1	6																				
City State Zip Code Blaine MN 55449			<b>Transaction ID : F56.4311</b>																										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00																										
Name of Employer Occupation Requested Requested																													

<b>D. Full Name (Last, First, Middle Initial)</b> Chris Giles			Date of Receipt																										
Mailing Address 1183 Blue Stem Trail			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	0	3		3	0		2	0	1	6		
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																		
0	3		3	0		2	0	1	6																				
City State Zip Code Lafayette CO 80026			<b>Transaction ID : F56.4318</b>																										
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00																										
Name of Employer Occupation Requested Requested																													

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1800.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	▶	

**SCHEDULE 5-A  
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)  
CatholicVote.org

<b>A. Full Name (Last, First, Middle Initial)</b> John Rankin			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2016		
Mailing Address 5807 Palmetto Drive			<b>Transaction ID : F56.4312</b>		
City Fort Pierce	State FL	Zip Code 34982	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Requested			Occupation Requested		

<b>B. Full Name (Last, First, Middle Initial)</b> Unitemized Unitemized			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2016		
Mailing Address PO Box 259837			<b>Transaction ID : F56.4322</b>		
City Madison	State WI	Zip Code 53725	Amount of Each Receipt this Period 12179.00		
FEC ID number of contributing federal political committee. C					
Name of Employer None			Occupation None		

<b>C. Full Name (Last, First, Middle Initial)</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>D. Full Name (Last, First, Middle Initial)</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	12679.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	14479.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CatholicVote.org

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1601 Willow Road		Amount 500.00	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure Facebook ads		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD J TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 500.00		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4294

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 04 / 2016	
Mailing Address 1601 Willow Road		Amount 1000.00	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure Ad		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD J TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000.00		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4298

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 04 / 2016	
Mailing Address 1601 Willow Road		Amount 1000.00	
City Menlo Park	State CA	Zip Code 94025	
Purpose of Expenditure Ad		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DONALD J TRUMP		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1000.00		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.4299

(a) SUBTOTAL of Itemized Independent Expenditures.....	2500.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CatholicVote.org

Full Name (Last, First, Middle Initial) of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2016	
Mailing Address 1601 Willow Road		Amount 3500.00	
City Menlo Park	State CA	Zip Code 94025	
Transaction ID : F57.4304			
Purpose of Expenditure Web ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: RAFAEL EDWARD 'TED' CRUZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3500.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	3500.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	▶	6000.00